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#### TRANSMITTAL LETTER:

Department of State Division of Corporations P. 0. Box 6327 Tallahassee, FL 32314

SUBJECT: DYRICON HEALTHCARE CORPORATION

(Proposed corporate name - must include suffix)

Enclosed is an original and one (I) copy of the articles of incorporation and a check for:

[ ]\$78.75 Filing Fee & Certified Copy [ \$87.50 Filing Fee, Certified Copy & Certificate

ADDITIONAL COPY REQUIRED

Richard Teniola

Name (Printed or typed)

12225 NW 30<sup>th</sup> Manor

Address

Sunrise, Fl. 333432

City, State & Zip

1-954-296-5706

Daytime Telephone number

## ARTICLES OF INCORPORATION OF DYRICON HEALTHCARE CORPORATION FILED

#### **ARTICLE I**

The name and address of this principal corporation is **DYRICON HEALTHCARE** [> 1: 02 **CORPORATION**,12225 NW 30<sup>TH</sup> Manor, Sunrise, FI 33323, in Broward. The corporation is organized pursuant to the FLORIDA Nonprofit Corporation TALLAHASSEE, FLORIDA

#### **ARTICLE II**

This corporation is a nonprofit public benefit corporation and is not organized for the private gain of any person. The corporation is organized under the Nonprofit Public Benefit Corporation Law for, charitable and educational purposes to aid the poor and disadvantaged individuals and families domestic and foreign towards a life of self-sufficiency. The nature, objectives and purposes of this corporation shall include, but not be limited to, the following activities:

- A. The main goal of This corporations will provide Preventive Healthcare Seminars and conduct HIV / AIDS Educational Classes, to persons of low and moderate income to aid such persons efforts to achieve economic self sufficiency and stability.
- B. Future programs of this corporation will include but not be limited to the following: Education and training of Health Care Professionals, community services, crime and drug use prevention, community development corporation, residential rehabilitation and development, historical preservation and restoration of designated structures, obtaining municipal improvements and services, parenting, rehabilitation of juvenile offenders, drug dependency seminars and programming will be targeted within "At Risk Communities," both domestic and foreign, basic computers training, anger management and domestic violence classes.
- C. This corporation will promote it's quest through television, radio, advertisement campaigns and any other media that will further spread the message of self empowering.
- D. To receive any real or personal property by gift, grant, devise, or bequest from any individual, foundation, corporation, either public or private, or governmental instrumentality, in support of the general purposes of the corporation and to administer such property for the purposes of the corporation.
- E. To make grants, gifts, payments, contributions in money or otherwise, for use exclusively for religious, charitable, literacy, civic or educational purposes.

#### **ARTICLE III**

The duration of this corporation shall be perpetual and shall have no stock. This corporation shall have members in accordance with provisions of bylaws.

#### **ARTICLE IV**

The address of the Registered office is: 12225 NW 30<sup>th</sup> Manor, Sunrise, Fl. 33323 and the name and address of the of the registered agent of the regi

RICHARD TENIOLA 12225 NW 30<sup>th</sup> Manor Sunrise, Fl. 33323

#### ARTICLE V

- (A) This corporation is organized and operated exclusively for Educational and Charitable purposes within the meaning of Section 501 (c)(3) of the Internal Revenue Code.
- (B) Not-withstanding any other provision of these Articles, the corporation shall not carry on any other activities not permitted to carry on (1) by a corporation exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code or (2) by a corporation contributions to which are deductible under Section 170(c)(2) of the Internal Revenue Code.

#### **ARTICLE VI**

The Directors are elected in accordance with the Bylaws. The name and address of the persons appointed to act as the initial Directors of this corporation are:

NAME ADDRESS

Richard Teniola, President Dennis Akinduro, Treasurer Akeem Shoneye, Secretary 12225 NW 30<sup>th</sup> Manor, Sunrise, Fl. 33323 5851 NW 16<sup>th</sup> Place # 307, Sunrise, Fl. 33323 12225 NW 30<sup>th</sup> Manor, Sunrise, Fl. 33323

#### **ARTICLE VII**

The property of this corporation is irrevocably dedicated to Charitable and Educational purposes and no part of the net income or assets of the organization shall ever ensure to the benefit of any director, officer or member thereof or the benefit of any private person.

#### **ARTICLE VIII**

On the dissolution or winding up of the corporation, its assets remaining after payment of, or provision for payment of, all debts, and liabilities of this corporation, shall be distributed to a nonprofit fund, foundation, or corporation, which is organized and operated exclusively for, Educational and Charitable under Section 501 (c)(3) of the Internal Revenue Code, or corresponding section of any future federal tax code, or shall be distributed to the federal government, or to a state or local government for a public purpose. Any such asset not disposed of shall be disposed of by the Court of Common Pleas of the county in which the principal office of the organization is located, exclusive for such purposes or to such organization or organizations, as said Court shall determine which are organized and operated exclusively for such purposes.

#### ARTICLE IX

Executed on September 11, 2004. The name and address of the incorporator of this corporation shall be:

12225 NW 30<sup>th</sup> Manor Sunrise, Fl. 33323

HARD PENIOLA

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT / REGISTER OFFICE

PURSANT TO THE PROVISIONS OF SECTION 617.0501, FLORIDA STSTUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE / REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. THE NAME OF THE CORAPORATION IS:
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#### DYRICON HEALTHCARE CORPORATION

(must include suffix)

2. The name and address of the registered agent and office is:

Richard Teniola	
(Name)	
12225 NW 30 <sup>th</sup> Manor	TAL SE
(P.O.Box or Mail Drop Box NOT ACCEPTABLE)	RECRET In sep
Sunrise, Fl. 33323	IN THE SERVICE OF THE
(City / State / Zip)	F STAT

Having been named as registered agent and to accept service of process for the above state corporation at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(SIGNATURE) (DATE)